PTO/SB/06 (08-03)
Approved for use through 7/31/2006. OMB 0651-0032
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Und	er the Paperwork PATE	NT APPLIC	ATION I	FEE DETER	collection of information unless it displays awalid OMB control number. RECORD Application or Docket Number					
Substitute for Form PTO-875 CLAIMS AS FILED – PART I (Column 1) (Column 2)						SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
			-,	NUMBER EXTRA		RATE	FEE	,	RATE	FEE
FOR NUMBER FILED NUMBER EXTRA BASIC FEE				KEATION	INIC	\$	OR		\$	
(37 CFR 1.16(a)) TOTAL CLAIMS								x s =		
(37 C	FR 1.16(c))		minus 20 = *			× \$=		OR		
INDEPENDENT CLAIMS (37 CFR 1.16(b)) minus 3 =					× \$=		OR	=		
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))						+ \$=		OR	+ \$=	
* If the difference in column 1 is less than zero, enter *0* in column 2.						TOTAL		OR	TOTAL	
	CI	AIMS AS AMI	FNDFD -	- PART II		•				
lδ	-5-6C (Column 1) (Column 2) (Column 3)				(Column 3)	SMALL ENTITY		OR		R THAN ENTITY
, j	J (93	CLAIMS REMAINING AFTER		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FE
AMENDMENT	Total (37 CFR 1.16(c))	.52	Minus	. 83	=	x \$=		OR	x \$=	
	Independent (37 CFR 1.16(b))	10	Minus	10		x \$=		OR	× s=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ s =		OR	+\$=	
	·					TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
(Column 1) (Column 2) (Column 3)										
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	•	Minus	••	=	x \$=		OR	x s =	
	Independent (37 CFR 1.16(b))	•	Minus	***	=	x \$=		OR	x s=	
ΔM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+s =		OR	+ \$=	ł
FIRST PRESENTATION OF MOLTHICE DEFENDENT, OF SILVEY						TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
		. (Column 1)		(Column 2)	(Column 3)			_		
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE	·	RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	•	Minus	••	=	x_ s =		OR	x s=	<u> </u>
	Independent (37 CFR 1.16(b))	† ·	Minus	•••	=	x s =		OR	x s=	ļ
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ \$=		OR	+ s=	<u> </u>
						TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
	 If the entry in If the "Highes 	column 1 is less th I Number Previous	dy Paid For	y in column 2, wi	: is less than 20	emer 20.				

"If the "Highest Number Previously Paid For' (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.